

## CLAIMS ONLY

Application Number

10/785658

Filing Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		May be used for additional claims or amendments					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/								51			
2	/								52			
3	/								53			
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45									95			
46									96			
47									97			
48									98			
49									99			
50									100			
Total Indep	/								Total Indep			
Total Depend	14								Total Depend			
Total Claims	15								Total Claims			